United States Bankruptcy Court District of Idaho Complete this form and mail to: U.S. Bankruptcy Court 550 W.Fort St. Boise, ID 83724		PROOF OF CLAIM THIS SPACE IF FOR COURT USE ONLY	
mplete this form and mail to: U.S. Bankruptcy Court 350 W.Fort S	a read by the displacement decision of the control	UNITED STATES COURTS DISTRICT OF IDAHO	
me of Debtor:	Case Number:	Digital	
COMMUNITY HOME HEALTH INC	98-02141	— AUG 1 2 1998	
napter: Trustee: oof of claim form and all supporting documents must be filed in DU	PLICATE on Chapter 12 and 13 cases	ODGED M. REC'D	
THE: This form aboutd not be used to make a claim for an administrate the case. A "request" for payment of an administrative expense may be	arive expense arising after the commenceme find pursuant to D.C.C. §463	bi	
ame of Creditor (The person or other entity to whom the debtor owes oney or property):	relating to your claim. Attach con	yone else has filed a proof of claim py of statement giving particulars. wed any notices from the bankruptcy cou om the address on the envelope.	
ccount or other number by which identifies debtor:	Check here if this claim: Replace dated:	Amends a previously filed claim	
Retiree benefits as defined in 11 U.S.C. §1114(a) Other (please of Wages, Salaries and compensation: Your Social Security Nu August Compensation for services performed from Link. 1998 Date debt was incurred:	imber: 518-13-8655	date).	
	5. UNSECURED PRIORITY CLA	.IM., .	
CURED CLAIM		The State of the S	
(including a right of setoff)	☐ Check box if you have an unsecured p	mority claim	
Brief Description of Collateral:	Amount entitled to priority \$	in la companya di mangantan di m Tanggan tanggan di mangantan di m	
□ Real Estate □ Motor Vehicle □ Other	SPECIFY PRIORITY OF CLAIM:	A COMPANY OF THE STATE OF THE S	
Value of Collateral \$	Chiveres Solaries or commissions (un	to \$4000)* earned within 90 days before filir	
Amount of arrearage and other charges at time the case was filed included in secured claim, if any:	of the bankruptcy petition or cessation	n or the debtor's business, whichever is earlie	
ncluded in secured claim, if any.	(11 U.S.C. § 507 (a)(3)) Contributions to an employee benefit	plan (11 U.S.C. § 507 (a)(4))	
6. TOTAL AMOUNT OF CLAIM AT TIME CASE WAS FILE		chase, lease, or rental of property of services	
5. TOTAL AMOUNT OF CLAIM AT TIME CASE WIS 112	personal, family or household use (1) Alimony, maintenance, or support ow	red to a spouse, former spouse or child	
		(11 U.S.C. § 507 (a)(7)) Taxes or penalties owed to governmental units (11 U.S.C. § 507 (a)(8))	
UNSECURED \$SECURED \$	— (11 U.S.C. § 507 (a)(7))	ntal units (11 U.S.C. & 507 (a)(8))	
UNSECURED \$SECURED \$	☐ (11 U.S.C. § 507 (a)(7)) ☐ Taxes or penalties owed to governme ☐ Other - Specify applicable paragraph	ntal units (11 U.S.C. § 507 (a)(8))	
PRIORITY \$ TOTAL \$431.11	☐ Taxes or penalties owed to governme ☐ Other - Specify applicable paragraph	ntal units (11 U.S.C. § 507 (a)(8)) of (11 U.S.C. § 507 (a)() 14/1/98 and every 3 years thereafter with	
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